### Case 19-17699-elf Doc 15 Filed 01/02/20 Entered 01/02/20 10:28:48 Desc Main Document Page 1 of 26

Fill in th	is information to identi	fy your case:			
Debtor 1	Jacqueline Amar	0			
	First Name	Middle Name	Last Name		)
Debtor 2	Miguel Amaro				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA, READIN	NG DIVISION	
Case number	19-17699				
(if known)					☐ Check if this is an
					amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you fill your original forms, you must fill out a new Summary and check the box at the top of this page.

Pa	rt 1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	624,359.20
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,050.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	631,409.20
Pa	rt 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	729,560.51
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e 3chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & Chedule E/F	\$	32,511.00
	Your total liabilities	\$	762,071.51
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	5,953.12
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,060.60
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your of	her schedı	ules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a pupurpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal, fa	mily, or household

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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Debtor 2	Amaro, Jacqueline & Amaro, Miguel	Case number (if known) 1	19-17699		
	n the Statement of Your Current Monthly Income: Copy A-1 Line 11: OR Form 122B Line 11: OR Form 122C-1 Line	•	al Form	\$ 4.	,278.28

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Debtor 1

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	Ous	0 10 17000 (	JII DOC 13	Do	cument Page 3 of 26	-120 10.2	_0.40 L	,030	Wichii
	Fill in th	is information to i	dentify your case	and th	nis filing:				
Debto	or 1	Jacqueline A	Amaro						
		First Name	Middle	Name	Last Name				
Debto		Miguel Ama		No.	Lead News		1		
(Spous	se, if filing)	First Name	Middle	Name	Last Name				
Unite	d States Ba	ankruptcy Court for	the: EASTERN	DISTR	ICT OF PENNSYLVANIA, READING DIVI	SION			
Case	number	19-17699							Check if this is an amended filing
Sc	hedul	orm 106A/B le A/B: Pr	operty	ın asset	only once. If an asset fits in more than one	category list	the asset in t		2/15
think it inform	t fits best. Beation. If more every ques	Be as complete and a re space is needed, a stion.	ccurate as possible ttach a separate sh	e. If two eet to ti	his form. On the top of any additional pages,  Estate You Own or Have an Interest In	equally respo	nsible for sup	plying	correct
_	No. Go to Pa	rt 2.							
1.1				Wha	t is the property? Check all that apply				
	4000 F				Single-family home				exemptions. Put
	4269 Fox Street address	wood CIr , if available, or other des	cription		Duplex or multi-unit building Condominium or cooperative				s on Schedule D: ured by Property.
					Manufactured or mobile home			_	
	Easton	PA	18040-6676		l Land	Current va entire prop			ent value of the on you own?
-	City	State	ZIP Code		-		52,273.00		\$352,273.00
									nership interest
				Who	has an interest in the property? Check one		e), if known.	uncy by	the chinenes, or
					Debtor 1 only	Tenancy	by the En	tirety	· 
_					Debtor 2 only				
-	County				Debtor 1 and Debtor 2 only	- Check	c if this is com	munity	nronerty
					At least one of the debtors and another		structions)	umty	p. operty
					er information you wish to add about this iten	n, such as lo	cal		

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Debtor 2		Jacqueline	& Amaro, Mig	uel	Ca	se number (if known)	19-1	7699
1.2	you own or h	nave more	than one, list h		is the property? Check all that apply			
70	<b>021 Hopkins </b> eet address, if availa		cription		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any	secured	ims or exemptions. Put d claims on Schedule D: as Secured by Property.
City	harlotte	NC State	<b>28269-2339</b> ZIP Code		Manufactured or mobile home Land Investment property Timeshare	Current value of t entire property? \$196,315	5.20	Current value of the portion you own? \$196,315.20
				Who	Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	_ (such as fee simp	ole, tena nown.	our ownership interest ancy by the entireties, or tirety
Соц	unty			□ ■ Other	Debtor 1 and Debtor 2 only  At least one of the debtors and another r information you wish to add about this iterty identification number:	(see instructions		munity property
					8,128 less 10% cost of sale = \$1	96,315.20		
1.3	you own or h	nave more	than one, list h	What	is the property? Check all that apply Single-family home Duplex or multi-unit building			ims or exemptions. Put I claims on <i>Schedule D:</i>
Stre	eet address, if availa	ble, or other des	cription		Condominium or cooperative	Creditors Who Hav	re Claim	ns Secured by Property.
City	aston ⁄	PA State	18042-4059 ZIP Code		Timeshare	Current value of t entire property? \$75,771  Describe the natu	.00	Current value of the portion you own? \$75,771.00
				Who			own.	tirety
Cou	unty				•	(see instructions		munity property
					our entries from Part 1, including an			\$624,359.20
	Describe Your V		Write that numbe	r here		=>		\$024,339.20 
someone	e else drives. If y	ou lease a ve		on Sch	y vehicles, whether they are register edule G: Executory Contracts and Une. rcycles		y vehic	eles you own that
$\Box$ $\lor$	C							

Official Form 106A/B Schedule A/B: Property page 2

Case 19-17699-elf Doc 15 Filed 01/02/20 Entered 01/02/20 10:28:48 Desc Main Page 5 of 26 Document Debtor 1 Amaro, Jacqueline & Amaro, Miguel Case number (if known) 19-17699 Debtor 2 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$0.00 .you have attached for Part 2. Write that number here.....>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Kitchen furniture and appliances \$2,000; dining room furniture \$500; Living Room Furniture \$1000; tv DVD \$600; bedroom \$5,650.00 furniture \$800; washer/dryer \$750. 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe.... \$300.00 Clothing shoes Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses

Official Form 106A/B Schedule A/B: Property

page 3

■ No

☐ Yes. Describe.....

Case 19-17699-elf Doc 15 Filed 01/02/20 Entered 01/02/20 10:28:48 Desc Main Page 6 of 26 Document Debtor 1 Amaro, Jacqueline & Amaro, Miguel Case number (if known) 19-17699 Debtor 2 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for \$5,950.00 Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes. 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Checking Account Wells Fargo 5405 \$0.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ Yes. List each account separately.

Type of account: Institution name:

#### 22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No

Yes. .....

Institution name or individual:

**Security Deposit on** Rental Unit

Juan Martinez

\$1,100.00

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

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	ebtor 1 ebtor 2	Amaro,	Jacqueline & Amaro, Migue	el age 7	Case number (if known)	19-17699
	☐ Yes.		Issuer name and description.			
24			ncation IRA, in an account in a q ()(1), 529A(b), and 529(b)(1).	ualified ABLE program, or und	er a qualified state tuition progra	am.
	☐ Yes.		Institution name and description	n. Separately file the records of ar	ny interests.11 U.S.C. § 521(c):	
25	Trusts ■ No	, equitable	or future interests in property (c	other than anything listed in lin	e 1), and rights or powers exerc	isable for your benefit
	☐ Yes.	Give speci	fic information about them			
26			ts, trademarks, trade secrets, ar t domain names, websites, proceed		reements	
	☐ Yes.	Give speci	fic information about them			
27			ses, and other general intangible g permits, exclusive licenses, coop		or licenses, professional licenses	
	☐ Yes.	Give speci	fic information about them			
M	oney or	property o	wed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax ref	funds owed	l to you			
	■ No □ Yes.	Give specifi	c information about them, including	g whether you already filed the retu	urns and the tax years	
29	Exam <sub>l</sub> ■ No		ue or lump sum alimony, spousal s	support, child support, maintenar	nce, divorce settlement, property s	ettlement
30		<i>ples:</i> Unpaid	omeone owes you wages, disability insurance payme I loans you made to someone else		vacation pay, workers' compensation	on, Social Security benefits;
		Give specif	ic information			
31			ance policies disability, or life insurance; health	savings account (HSA); credit, ho	omeowner's, or renter's insurance	
		Name the ir	nsurance company of each policy a Company name:	nd list its value.	Beneficiary:	Surrender or refund value:
32	If you died.		operty that is due you from som ficiary of a living trust, expect proce		or are currently entitled to receive p	roperty because someone has
	■ No □ Yes.	Give specif	ic information			
33			ird parties, whether or not you h nts, employment disputes, insurar		lemand for payment	
		Describe e	ach claim			
34	Other o	contingent	and unliquidated claims of ever	y nature, including counterclai	ms of the debtor and rights to so	et off claims
	☐ Yes.	Describe e	ach claim			

Official Form 106A/B Schedule A/B: Property page 5

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Debt Debt	Amoro locariolino 9 Amoro Migriol		Case number (if known)	19-17699
35. <b>A</b>	ny financial assets you did not already list			
	No			
	Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, including Part 4. Write that number here			\$1,100.00
Part	Describe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	te in Part 1.	
37. <b>D</b>	you own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go to Part 6.			
	/es. Go to line 38.			
Part	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	t In.	
46. <b>C</b>	o you own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
	o you have other property of any kind you did not already list? Examples: Season tickets, country club membership	,		
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$624,359.20
	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$5,950.00		
58.	Part 4: Total financial assets, line 36	\$1,100.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$7,050.00	Copy personal property to	al <b>\$7,050.00</b>
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$631,409.20

Official Form 106A/B Schedule A/B: Property page 6

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Fill in thi	is information to identif	y your case:			
Debtor 1	Jacqueline Amar	0			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F PENNSYLVANIA, READ	ING DIVISION	
_	19-17699				
(if known)					Check if this is an amended filing

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	art 1: Identify the Property You Claim as E	xempt								
1.	Which set of exemptions are you claiming?	? Check one only, even	if you	r spouse is filing with you.						
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	■ You are claiming federal exemptions. 11 U	.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.						
D	ebtor 1 Exemptions									
	7021 Hopkins St	\$196,315.20		\$11,850.00	11 USC § 522(d)(5)					
	Charlotte NC, 28269-2339 Line from Schedule A/B 1.2			100% of fair market value, up to any applicable statutory limit						
	7021 Hopkins St	\$196,315.20		\$769.50	11 USC § 522(d)(5)					
	Charlotte NC, 28269-2339 Line from Schedule A/B 1.2			100% of fair market value, up to any applicable statutory limit						
	Kitchen furniture and appliances \$2,000; dining room furniture \$500;	\$5,650.00		\$5,650.00	11 USC § 522(d)(3)					
	Living Room Furniture \$1000; tv DVD \$600; bedroom furniture \$800; washer/dryer \$750. Line from Schedule A/B 6.1			100% of fair market value, up to any applicable statutory limit						
	Clothing shoes Line from Schedule A/B 11.1	\$300.00		\$300.00	11 USC § 522(d)(3)					

100% of fair market value, up to any applicable statutory limit

	Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption						
		Copy the value from Schedule A/B	Check only one box for each exemption.							
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3 No									
	<ul> <li>No</li> <li>Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?</li> <li>□ No</li> </ul>									

							_		
Fill i	in this infor	mation to identify your	case:						
Deb	tor 1								
		First Name	Middl	e Name	L	ast Name	}		
	tor 2 use if, filing)	Miguel Amaro First Name	Middl	e Name	L	ast Name			
Unite	ed States Ba	ankruptcy Court for the:	EASTER	N DISTRICT OF P	ENNS	YLVANIA, READING DIVISION			
Case	e number	19-17699					}		
(if kno	_	19-17099						Check if this is an amended filing	
Off	icial Fo	orm 106C							
Sc	hedul	e C: The Pro	operty	y You Cla	aim	as Exempt			4/19
prope	erty you listed nd attach to t	I on Schedule A/B: Prope	erty (Official I	Form 106A/B) as y	our sou	r, both are equally responsible for supurce, list the property that you claim as ary. On the top of any additional pages	s exempt. If	f more space is neede	d, fill
funds to a p appli	s—may be uparticular do icable statut	ınlimited in dollar amou	int. Howeve lue of the p	er, if you claim an roperty is determ	exemp	s, rights to receive certain benefits ption of 100% of fair market value of the exceed that amount, your exemp	under a lav	w that limits the exer	mption
1. \	Which set o	f exemptions are you cl	aiming? Ch	neck one only, ever	n if you	r spouse is filing with you.			
I	☐ You are cl	aiming state and federal r	nonbankrupto	cy exemptions. 11	U.S.C	. § 522(b)(3)			
I	You are cl	aiming federal exemptions	s. 11 U.S.C	5. § 522(b)(2)					
2. <b>I</b>	For any pro	perty you list on Sched	ule A/B that	you claim as exe	empt, f	ill in the information below.			
		ion of the property and ling that lists this property		urrent value of the ortion you own	Am	ount of the exemption you claim	Specific I	aws that allow exempti	on
				opy the value from chedule A/B	Che	eck only one box for each exemption.			
	otor 2 Exer								
	Brief descript Line from <i>Sc</i> i								
						100% of fair market value, up to any applicable statutory limit			
		ming a homestead exer				I on or after the date of adjustment.)			
( 	■ No	ajustin <del>o</del> nt on 4/0 1/22 and	every 3 year	s anter mat for Cas	co ilieu	i on or arter the date of adjustment.)			
I	☐ Yes. Did	d you acquire the property	covered by	the exemption with	in 1,21	5 days before you filed this case?			
		lo	·	•					
	□ Y	'es							

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Fill in this information to ident	ify your case:	2 01 20		
Debtor 1 Jacqueline Ama				
First Name  Debtor 2 Miguel Amaro	Middle Name Last Name			
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the:	EASTERN DISTRICT OF PENNSYLVANIA,	READING DIVISION		
Case number (if known) 19-17699				if this is an led filing
Official Form 106D				-
Schedule D: Creditors	Who Have Claims Secure	d by Propert	У	12/15
	f two married people are filing together, both are eq , number the entries, and attach it to this form. On t			
1. Do any creditors have claims secured by	your property?			
$\square$ No. Check this box and submit this	s form to the court with your other schedules. You	u have nothing else to re	port on this form.	
Yes. Fill in all of the information be	elow.			
Part 1: List All Secured Claims				
	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor 's name.	Amount of claim Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 City of Easton	Describe the property that secures the claim:	\$1,140.59	\$75,771.00	\$1,140.59
Creditor's Name	32 S 14th St, Easton, PA 18042-4059			
1 S 3rd St Easton, PA 18042-4578 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Who owes the debt? Check one.  Debtor 1 only	Nature of lien. Check all that apply.  An agreement you made (such as mortgage or se	scurod		
Debtor 2 only	car loan)	curea		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) 32 S. 14th	St.		
Date debt was incurred	Last 4 digits of account number 1217			
2.2 City of Easton	Describe the property that secures the claim:	\$2,317.09	\$75,771.00	\$2,317.09
Creditor's Name	32 S 14th St, Easton, PA 18042-4059			
1 S 3rd St Easton, PA 18042-4578	As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	Disputed  Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or se car loan)	ecured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)  32 S. 14th	St.		
Date debt was incurred	Last 4 digits of account number 1313			

Debtor 1 Jacqueline Amaro	Case number (f known) 19-17699			
First Name Middle N				
Debtor 2 Miguel Amaro First Name Middle N	ame Last Name			
	<del></del>			
2.3 City of Easton	Describe the property that secures the claim:	\$3,897.16	\$75,771.00	\$3,897.16
Creditor's Name	32 S 14th St, Easton, PA 18042-4059			
1 S 3rd St Easton, PA 18042-4578	As of the date you file, the claim is: Check all that apply.  Contingent	l		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed  Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	■ Other (including a right to offset) 32 S. 14t	h St.		
community debt				
Date debt was incurred	Last 4 digits of account number 843	5		
2.4 City of Easton	Describe the property that secures the claim:	\$1,847.55	\$75,771.00	\$1,847.55
Creditor's Name	32 S 14th St, Easton, PA	<u>Ψ1,047.33</u>	\$13,111.00	\$1,047.33
	18042-4059			
1 S 3rd St	As of the date you file, the claim is: Check all that apply.			
Easton, PA 18042-4578	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or s car loan)	secured		
Debtor 2 only	_			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another  Check if this claim relates to a	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) 32 S. 14t	h <b>C</b> +		
community debt	Other (including a right to offset) 32 S. 14t	11 31.		
Date debt was incurred	Last 4 digits of account number 8549	9		
2.5 Wells Fargo	Describe the property that secures the claim:	\$110,926.56	\$352,273.00	\$52,801.56
Creditor's Name	4269 Foxwood Cir, Easton, PA 18040-6676			
PO Box 10335	As of the date you file, the claim is: Check all that			
Des Moines, IA 50306-0335	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Number, Street, Oily, State & Zip Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or s	secured		
☐ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			

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Debtor 1 Jacqueline Amaro		Case number (f known) 19-17699				
First Name Middle N	ame Last Name					
Debtor 2 Miguel Amaro						
First Name Middle N	ame Last Name					
2.6 Wells Fargo Hm Mortgag	Describe the property that secures the claim:	\$294,148.00	\$352,273.00	\$0.00		
Creditor's Name	4269 Foxwood Cir, Easton, PA 18040-6676					
8480 Stagecoach Cir Frederick, MD 21701-4747	As of the date you file, the claim is: Check all that apply.  Contingent	J				
Number, Street, City, State & Zip Code	☐ Unliquidated					
Number, Street, City, State & Zip Code	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or scar loan)	secured				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a	Other (including a right to offset)					
community debt						
Date debt was incurred 2010-09	Last 4 digits of account number 910	3				
Wells Fargo Home Mortgag	Describe the property that secures the claim:	\$183,695.70	\$196,315.20	\$0.00		
Creditor's Name	7021 Hopkins St, Charlotte, NC 28269-2339					
PO Box 14411	\$218,128 less 10% cost of sale = \$196,315.20					
Des Moines, IA	As of the date you file, the claim is: Check all that apply.	•				
50306-3411	Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or scar loan)	secured				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a community debt	Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number 849	2				

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Debtor 1 Jacqueline Amaro			Case number (if known)	19-17699		
	First Name Middle N	lame Last Name				
Deb	tor 2 Miguel Amaro					
	First Name Middle N	lame Last Name				
2.8	Wells Fargo Home Mortgag	Describe the property that secures the claim:	\$131,587.86	\$75,771.00	\$55,816.86	
	Creditor's Name	32 S 14th St, Easton, PA 18042-4059				
	PO Box 14411 Des Moines, IA 50306-3411	As of the date you file, the claim is: Check all that apply.  Contingent	l			
	Number, Street, City, State & Zip Code	☐ Unliquidated				
Who	o owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
	Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or s car loan)	secured			
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
ПА	at least one of the debtors and another	☐ Judgment lien from a lawsuit				
	Check if this claim relates to a community debt	Other (including a right to offset)				
Date	debt was incurred	Last 4 digits of account number 2082	2			
Add	the dollar value of your entries in Co	lumn A on this page. Write that number here:	\$729,560.5	51		
	s is the last page of your form, add the that number here:	ne dollar value totals from all pages.	\$729,560.5	51		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 10	01 26	
Fill in	this information to identify you	r case:			
Debtor 1	Jacqueline Amar	•			
Debior	First Name	Middle Name	Last Name		
Debtor 2	Miguel Amaro				
(Spouse if, fi		Middle Name	Last Name	_	
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT OF P	ENNSYLVANIA,	READING DIVISION	
Case nun	nber <b>19-17699</b>				
(if known)	10 11000				☐ Check if this is an
					amended filing
Ott: -: - i	Γο. www. 4.00Γ/Γ				
	Form 106E/F				4044
	ule E/F: Creditors W				12/15 RIORITY claims. List the other party to
D: Creditor the Continu	s Who Have Claims Secured by Pr	operty. If more space is needed re no information to report in a	, copy the Part yo	u need, fill it out, number the	cured claims that are listed in Schedule entries in the boxes on the left. Attach itional pages, write your name and
	y creditors have priority unsecured				
_		a ciaims against you?			
	. Go to Part 2.				
☐ Ye	S.				
Part 2:	List All of Your NONPRIORITY	/ Unsecured Claims			
	y creditors have nonpriority unsec				
_			50 O I		
⊔ No	. You have nothing to report in this pa	art. Submit this form to the court w	ith your other sche	dules.	
■ Ye	S.				
unsec	Il of your nonpriority unsecured cla ured claim, list the creditor separately ne creditor holds a particular claim, li	for each claim. For each claim lis	ted, identify what t	pe of claim it is. Do not list clain	
					Total claim
4.1 <b>C</b>	Citibank N.A.	Last 4 digits of	account number	4793	\$2,565.00
	Ionpriority Creditor's Name	When wee the	aht in ausra dO	0044.04	
	6Midland Funding 365 Northside Dr Ste 30	When was the d	ept incurred?	2014-01	
	San Diego, CA 92108-2709				
N	lumber Street City State Zip Code	As of the date y	ou file, the claim	s: Check all that apply	
v	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and and	•	IORITY unsecure	d claim:	
	Check if this claim is for a comm	_	3		
	ebt	<u> </u>	rising out of a sepa	ration agreement or divorce that	t you did not
Is	s the claim subject to offset?	report as priority		-	
	No	☐ Debts to pens	sion or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specif	y Open acco	unt	
		2 <b>3poo</b>	· <u>-</u>		

Debto Debto			Case number (if known)	19-17699
4.2	Citibank N.A.	Last 4 digits of account number	0456	\$1,725.00
	Nonpriority Creditor's Name %Portfolio REcov Assoc 120 Corporate Blvd Ste 1 Norfolk, VA 23502-4952	When was the debt incurred?	2014-08	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
		Contingent		
	Debtor 2 and Debtor 3 ank	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	u Ciaiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce tha	t you did not
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐Yes	Other. Specify Open acco	ount	
4.3	Kohls/Capital One	Last 4 digits of account number	6967	\$3,644.00
	Nonpriority Creditor's Name Kohls Credit PO Box 3043	When was the debt incurred?	2001-04	
	Milwaukee, WI 53201-3043  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce tha	t you did not
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Revolving	account	
4.4	Synchrony Bank/Walmart	Last 4 digits of account number	7271	\$6,228.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060	When was the debt incurred?	2010-11	
	Orlando, FL 32896-5060  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce tha	t you did not
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other Specify Revolving	account	

Debtor Debtor		<u> </u>		Case number (f known)	19-17699	
4.5	Tnb-Visa (TV) / Target	Last 4 digits of account nun	nber	3003		\$15,095.00
	Nonpriority Creditor's Name C/O Financial & Retail Services Mailstop PO Box 9475	When was the debt incurred	I?	2006-11		
	Minneapolis, MN 55440-9475  Number Street City State Zip Code	As of the date you file, the o	laim i	s: Check all that apply		
	Who incurred the debt? Check one.	As of the date you me, the o				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unse	ecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a	a sepa	ration agreement or divorce t	that you did not	
	Is the claim subject to offset?	report as priority claims			,	
	■ No	☐ Debts to pension or profit-	sharin	g plans, and other similar del	bts	
	Yes	Other. Specify Revolv	ing :	account		
4.6	World Financial Network Bank	Last 4 digits of account nun	nber	2039		\$3,254.00
	Nonpriority Creditor's Name %Portfolio Recov Assoc 120 Corporate Blvd Ste 1	When was the debt incurred		2015-07		<del>40,20</del> <del>0</del>
	Norfolk, VA 23502-4952  Number Street City State Zip Code	As of the date you file, the c	laim i	s: Check all that apply		
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unse	ecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a	a sepa	ration agreement or divorce t	that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-	ah a ri a	a along and other similar dal	hto	
	■ No □ Yes	Other. Specify Open a			DIS	
	Li res	Other. Specify	1000	unt		
Part 3:	List Others to Be Notified About a Debt Th	nat You Already Listed				
is tryi have	nis page only if you have others to be notified abouing to collect from you for a debt you owe to someomore than one creditor for any of the debts that you defor any debts in Parts 1 or 2, do not fill out or su	one else, list the original credi u listed in Parts 1 or 2, list the	tor in	Parts 1 or 2, then list the co	ollection agency	here. Similarly, if you
		which entry in Part 1 or Part 2 di		_		
	k/capone V 17000 Ridgewood Dr	e <b>4.3</b> of (Check one):	_	Part 1: Creditors with Priorit	•	
	monee Falls, WI 53051	t 4 digits of account number		Part 2: Creditors with Nonp	riority Unsecured (	Jaims
	Las	t 4 digits of account number		6967		
		which entry in Part 1 or Part 2 di		_		
	nd Funding Line Northside Dr Ste 30	e <b>4.1</b> of (Check one):	_	Part 1: Creditors with Priorit	•	
	Diego, CA 92108-2709	t 4 digits of account number	-	Part 2: Creditors with Nonpo	riority Unsecured (	claims
NI.	and Address	under commercial Policy Control				
		which entry in Part 1 or Part 2 di • <b>4.6</b> of ( <i>Check one</i> ):		list the original creditor?  Part 1: Creditors with Priorit	tv Unsecured Clair	ns
120 C	orporate Blvd Ste 1		_	Part 2: Creditors with Nonpo	•	
Norfo	Ik, VA 23502-4952	t 4 digits of account number	_	2039	, oncoured t	
Name a	nd Address On	which entry in Part 1 or Part 2 di	id you	list the original creditor?		

Official Form 106 E/F

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Debtor 1 Debtor 2 Amaro, Jacqueline & Amaro, Mi	guel	Case number (f known)	19-17699
Portfolio Recov Assoc 120 Corporate Blvd Ste 1	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority ☐ Part 2: Creditors with Nonpri	
Norfolk, VA 23502-4952	Last 4 digits of account number	0456	
Name and Address Syncb/Walmart DC PO Box 965024 Orlando, FL 32896-5024	On which entry in Part 1 or Part 2 did y Line 4.4 of (Check one):  Last 4 digits of account number	you list the original creditor?  ☐ Part 1: Creditors with Priority  ☐ Part 2: Creditors with Nonpri  7271	
Name and Address Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673	On which entry in Part 1 or Part 2 did y Line 4.5 of (Check one):  Last 4 digits of account number	rou list the original creditor?  ☐ Part 1: Creditors with Priority ☐ Part 2: Creditors with Nonpri  3003	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				T. ( )   O)
	6f.	Student loans	6f.	Total Claim
Total claims	ОІ.	Student loans	о.	\$ 0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
	- 3	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 32,511.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 32,511.00

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Fill in this information to identify your case:					
Debtor 1	Jacqueline Amar				
	First Name	Middle Name	Last Name		
Debtor 2	Miguel Amaro				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F PENNSYLVANIA, READING	G DIVISION	
Case number	19-17699				
(if known)					

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	whom you have th , Street, City, State and Zlf	e contract or lease	State what the contract or lease is for
2.1					
	Name				<del></del>
	Number	Street			<del>_</del>
	City		State	ZIP Code	<del></del>
2.2					<u> </u>
	Name				
	Number	Street			<del></del>
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			<del>_</del>
	City		State	ZIP Code	<del></del>
2.4					
	Name				_
	Number	Street			<del>_</del>
	City		State	ZIP Code	<u> </u>
2.5	•				
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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		Documer	<u>nt Page 21 of</u>	26	_
Fill	in this information to identif	y your case:			
Debtor 1	Jacqueline Amar	0			
	First Name	Middle Name	Last Name		}
Debtor 2 (Spouse if, filin	Miguel Amaro  g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	EASTERN DISTRICT OF	F PENNSYLVANIA, REA	DING DIVISION	
Case numb	per <b>19-17699</b>				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
are filing to	gether, both are equally resp	onsible for supplying cor	rect information. If mor	e space is needed, c	te as possible. If two married people copy the Additional Page, fill it out, Iditional Pages, write your name and
	er (if known). Answer every o		onar rage to this page.	on the top of any Ad	antional rages, write your name and
1. Do y	ou have any codebtors? (If y	ou are filing a joint case, do	not list either spouse as	a codebtor.	
□ No					
■ Yes					
2 14/:41-	in the last 0 years, have yey	lived in a community and		(Community property	vatatos and tarritarias include Arizona
	nin the last 8 years, nave you nia, Idaho, Louisiana, Nevada,				v states and territories include Arizona,
■ No.	Go to line 3.				
☐ Yes.	Did your spouse, former spous	se, or legal equivalent live wi	th you at the time?		
line 2 a	again as a codebtor only if th Schedule E/F (Official Form	at person is a guarantor o	or cosigner. Make sure	you have listed the o	with you. List the person shown in reditor on Schedule D (Official Forn lle E/F, or Schedule G to fill out
(	Column 1: Your codebtor			Column 2: The cr	editor to whom you owe the debt
N	lame, Number, Street, City, State and Z	IP Code		Check all schedul	
	Miguel Amaro			■ Schedule D,	
	1269 Foxwood Cir Easton, PA 18040-6676			☐ Schedule E/F	·
•				☐ Schedule G _ City of Easton	
				City of Easton	

							_				
Fill	in this information to	o identify your cas	se:								
Deb	otor 1			_							
Debtor 2 Miguel Amaro (Spouse, if filing)					_						
Unit	ted States Bankrupt	ccy Court for the:	EASTERN DISTRICT READING DIVISION	OF PENNSYLVANIA,							
Case number 19-17699  Official Form 106l Schedule I: Your Income				.   _			☐ An a	Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:  MM / DD/ YYYY			·
Be a supp	es complete and ac plying correct infor use. If you are sepa ch a separate shee	curate as possik rmation. If you a arated and your	ole. If two married people re married and not filing spouse is not filing with a the top of any addition	g jointly, and your sp n you, do not include	ouse is	livir atior	ng with you about you	i, includ ir spou	e inforn se. If mo	nation about y ore space is n	our eeded,
1.	Fill in your employment										
	information.			Debtor 1				Debtor 2 or non-filing spouse			
	If you have more the attach a separate prinformation about	page with	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>			■ Employed □ Not employed  Truck Driver				
	employers.		Occupation								
Include part-time, seasonal, or self-employed work.		Employer's name			N	MSC Express Inc.					
Occupation may include student or <b>Employer's addre</b> homemaker, if it applies.			Employer's address					128 Ivy Ct Flemington, NJ 08822-7188			
			How long employed th	ere?							
Par	t 2: Give Det	ails About Mont	hly Income								
	mate monthly inco		e you file this form. If yo	ou have nothing to repo	rt for an	y line	e, write \$0 in	the spa	ce. Inclu	ıde your non-fil	ing spouse
	u or your non-filing s e, attach a separate		than one employer, comb	ine the information for	all empl	oyers	for that per	son on	he lines	below. If you n	eed more
							For Debto	or 1		ebtor 2 or iling spouse	
2.	, ,		r, and commissions (bef Iculate what the monthly w	, ,	2.	\$		0.00	\$	5,331.19	_
3.	Estimate and list	monthly overtin	ne pay.		3.	+\$		0.00	+\$_	47.47	_
4.	Calculate gross I	ncome. Add line	2 + line 3.		4.	\$	0.	.00_	\$_	5,378.66	

Official Form 106l Schedule I: Your Income page 1

Debt	or 2	Amaro, Jacqueline & Amaro, Miguel	_	Cas	e number (if known)	19-17699		
				Fo	or Debtor 1	For Debtor		
	Con	y line 4 here	4.	\$	0.00	non-filing s	378.66	
	ООР	y line 4 here	٦.	Ψ.	0.00	Ψ	370.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$ <u>1</u>	,057.82	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: new Jersey DI	5h			+ \$	6.50	
		new Jersey FLI		\$	0.00	\$	2.73	
		Ticket deduction		\$.	0.00	\$	33.32	
			_	\$	0.00	\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$1	100.37	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ _	0.00	\$4	278.29	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	00	ď	4 400 00	<b>c</b>	0.00	
	O.L.	monthly net income.	8a.	\$.	1,100.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify: 1/12 2016 tax refund	8h	+ \$		+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,674.83	\$	0.00	
			Г.				1	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,674.83 + \$_	4,278.29	= \$5	,953.12
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your dear friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not available:	epender		•		+\$	0.00
12.	Add	the amount in the last column of line 10 to the amount in line 11. The resu	ult is the	e con	nbined monthly inc	ome.	_	
	Write	e that amount on the Summary of Schedules and Statistical Summary of Certain	Liabiliti	es ar	nd Related <i>Data,</i> if i	t applies 12.		,953.12
13.	Doy	ou expect an increase or decrease within the year after you file this form?	?				Combined monthly in	
		No.						
		Yes Explain:						

Official Form 106l Schedule I: Your Income page 2

	in this information to identify yo	nir case.				
				01 1		
Deb	tor 1 Jacqueline A	Amaro			k if this is: An amended filing	
Deb	tor 2 Miguel Ama	ro			•	ing postpetition chapter 13
(Spo	ouse, if filing)				expenses as of the	
Unit	ed States Bankruptcy Court for the	EASTERN DISTRICT OF PENNS READING DIVISION	YLVANIA,	1	MM / DD / YYYY	
Cas	e number 19-17699					
(If kı	nown)					
Of	fficial Form 106J					
So	chedule J: Your I	Expenses				12/1:
Be a	as complete and accurate as ormation. If more space is nee nown). Answer every question	possible. If two married people are eded, attach another sheet to this foon.				
Par 1.	Is this a joint case?	hold				
١.	□ No. Go to line 2.					
	Yes. Does Debtor 2 live i	n a caparata hausahald?				
	<u>_</u>	i a separate nousenoiu:				
	■ No □ Yes. Debtor 2 mus	st file Official Form 106J-2, Expenses	for Separate Househo	old of Debtor	2.	
2.	Do you have dependents?	□ No				
	Do not list Debtor 1 and Debtor 2.	■ Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not otato the					□ No
	Do not state the dependents names.		Daughter			■ Yes
						□ No
			son			■ Yes
						□ No
						Yes
						□ No
3.	Do your expenses include expenses of people other th yourself and your dependent					☐ Yes
exp	imate your expenses as of yo	ng Monthly Expenses our bankruptcy filing date unless yo ankruptcy is filed. If this is a suppl				
valu		on-cash government assistance if ve included it on Schedule I: Your I			Your exp	enses
4.	The rental or home owners payments and any rent for the	hip expenses for your residence. In ground or lot.	clude first mortgage	4. \$		2,568.16
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's	, or renter's insurance		4b. \$		0.00
		epair, and upkeep expenses		4c. \$		50.00
F		on or condominium dues	no oquity lo	4d. \$		0.00
5.	Auditional mortgage payme	ents for your residence, such as hon	ne equity loans	5. \$		514.53

Amaro, Jacqueline & Amaro, Miguel	Case number (if known)	19-17699
Utilities:		
6a. Electricity, heat, natural gas	6a. \$	110.00
6b. Water, sewer, garbage collection	6b. \$	35.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	100.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	406.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	50.00
Personal care products and services	10. \$	35.00
Medical and dental expenses	11. \$	0.00
<b>Transportation.</b> Include gas, maintenance, bus or train fare.	· ——	
Do not include car payments.	12. \$	100.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
Charitable contributions and religious donations	14. \$	0.00
Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	100.00
15d. Other insurance. Specify:	15d. \$	0.00
<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16. \$	0.00
Installment or lease payments:	•	
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not report		0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106		
Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	
Other real property expenses not included in lines 4 or 5 of this form or on S 20a. Mortgages on other property	20a. \$	004.04
	20a. \$ 20b. \$	991.91
20b. Real estate taxes	·	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
Other: Specify:	21+\$	0.00
Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	5,060.60
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106.		3,000.00
	\$	E 000 00
22c. Add line 22a and 22b. The result is your monthly expenses.	<b>*</b>	5,060.60
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,953.12
23b. Copy your monthly expenses from line 22c above.	23b\$	5,060.60
		,
23c. Subtract your monthly expenses from your monthly income.		000 50
The result is your monthly net income.	23c. \$	892.52
Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage?  No.		ase or decrease because o
■ INU.		
Yes. Explain here:		

Fill in this i	information to identify ye	our case:				
Debtor 1	Jacqueline Amar					
	First Name	Middle Name	Las	t Name		
Debtor 2 (Spouse if, filing)	Miguel Amaro First Name	Middle Name	Lac	t Name		
(Spouse II, IIIIIg)	i iist ivaille	Middle Name	Las	t Ivaille		
United States B	ankruptcy Court for the:	EASTERN DISTRICT OF PE	NNSY	VANIA, READING DIVIS	ION	
Case number	19-17699					
(if known)						☐ Check if this is an
						amended filing
· You must file th obtaining mone	is form whenever you fi	, both are equally responsible le bankruptcy schedules or an n connection with a bankruptc 519, and 3571.	nended	l schedules. Making a fa	lse statement, co	
Sig	gn Below					
Did you pa	ay or agree to pay some	one who is NOT an attorney to	help y	ou fill out bankruptcy fo	orms?	
■ No						
☐ Yes.	Name of person					Petition Preparer's Notice, ignature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the summary	and sc	hedules filed with this d	eclaration and	
X /s/ Jac	cqueline Amaro		х	/s/ Miguel Amaro		
	ueline Amaro			Miguel Amaro		
	ure of Debtor 1			Signature of Debtor 2		
Date	January 2, 2020			Date January 2, 20	)20	